Labor Organization Orlicer and Employee Report

U.S. Departmen Labor



State

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in OMB No. 1214-0001 12/31/86 criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439,440. 1. Name and address of person filing 2. Name and address of labor organization IATSE 665 C. Liloa Wong Are 949 Kapiolani Blud. Suite 100 Hon. Hi. 96814 Hon. Hi., 968/6 3. Position in labor organization 4. Date fiscal year ended 5. File number (if assigned) December 31, 2001 Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name of Employer 229 Papakalani Av of plants and equipment Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name of business Address of business Entertainment Partners ☐ A. Labor Organization C. Employer 11. Nature and approximate dollar value of such dealings plant rental - \$110.40 Ash Plant Rental for Entire Show Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value 13. Name and address of employer 14. Nature of payment or consultant IF MORE SPACE IS NEEDED ATTACH ADDITIONAL SHEETS 15. Signature and verification—The undersigned declares, under the applicable penalties of the law, that all of the information in this report, including the attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct and complete.